

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|--------------------|--------------|----------------|
| FEE DETERMINATION | <i>[Signature]</i> | <i>00461</i> | <i>7/5/00</i> |
| O.I.P.E. CLASSIFIER | | <i>71473</i> | <i>8-15-00</i> |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here